

Attorney Docket No. MTI=31608

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE tion of : Tan et al. : 10/068,159 : February 5, 2002 nit : 2812 : Stacked Die in Die RGA Package

In re Application of :

Serial No.

Filing Date

Group Art Unit

For

Stacked Die in Die BGA Package

Confirmation No.

8043

### CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents,

Washington, D.C. 20231

37 CFR 1.8(a)

37 CFR 1.10

☐ with sufficient postage as first class mail ■ As "Express Mail Post Office to Addressee" Mailing Label No. EV 048319561 US

Transmission

☐ transmitted by facsimile to Fax No\_\_\_ addressed to Examiner \_\_ at the US Patent and Trademay Office.

Date: DCC 30,02

**Assistant Commissioner for Patents** 

Washington, D.C. 20231

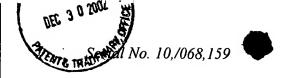
## **TRANSMITTAL**

- 1. Transmitted herewith is:
  - **Preliminary Amendment**
  - Replacement Claims (30 sheets)
  - Blacklined Claims (30 sheets)
  - Return Postcard

**STATUS** 

Applicant is a large entity. 2.

MKE/813459.1





# **EXTENSION OF TERM**

- 3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.
  - [X] Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.
  - [ ] Applicant petitions for an extension of time under 37 C.F.R. 1.136 for the total number of months checked below [fees: 37 C.F.R. 1.17(a)(1)-(4)]:

	Extension	Fee t	for other than	Fee for		
	(months)	<u>smal</u>	<u>l entity</u>	<u>small</u>	entity	
[ ]	one month	\$	110.00	\$	55.00	
[]	two months	\$	390.00	\$	195.00	
[ ]	three months	\$	890.00	\$	445.00	
[ ]	four months	\$	1,390.00	\$	695.00	
				Fee:	<u>\$0.00</u>	

If an additional extension of time is required, please consider this a petition therefor.

# **FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Remain After Amendmo	_		Highest No. Previously Paid For		Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total	148	Minus	111	=	x 9=\$	\$	37 x 18	\$666.00
Independent	31	Minus	27	=	x 42= \$	\$	4 x 84	\$336.00

FIRST PRESENTATION OF MULTIPLE DEP CLAIM

TOTAL
ADDIT. Fee \$

or TOTAL

ADDIT. Fee \$1,002.00

- c. [ ] No additional fee for claims is required.
- d. [X] Total additional fee for claims required \$1,002.00

### FEE DEFICIENCY

- 5. [X] If any additional extension and/or fee is required, charge Account No. 23-2053.
  - [X] If any additional fee for claims is required, charge Account No. 23-2053.

Date: December 30, 2002

Kristine M. Strodthoff, Reg. No. 34,259

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